APPLICATION DATA SHEET

Application Information	
Application Number::	
Filing Date::	Herewith
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	Yes
Computer Readable Form (CRF)?::	Yes
Number of Copies of CRF::	1
Title::	MODULATION OF APOLIPOPROTEIN (A) EXPRESSION
Attorney Docket Number::	ISPH-0595US.P1
Request for Early Publication?	No
Request for Non-Publication?	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type	
Licensed US Govt. Agency::	
Contract or Grant Number::	
Secrecy Order in Parent Application::	

Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States of America
Status::	Full Capacity
Given Name::	Roseanne
Middle Name::	
Family Name::	Crooke
Name Suffix::	
City of Residence::	Carlsbad
State of Province of Residence::	California
Country of Residence::	United States of America
Street of Mailing Address::	3211 Piragua Street
City of Mailing Address::	Carlsbad
State or Province of Mailing Address::	California
Country of Mailing Address::	United States of America
Postal or Zip Code of Mailing Address::	19087

Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States of America
Status::	Full Capacity
Given Name::	Mark
Middle Name::	J.
Family Name::	Graham
Name Suffix::	
City of Residence::	San Clemente
State of Province of Residence::	California
Country of Residence::	United States of America
Street of Mailing Address::	2305 S. Ola Vista
City of Mailing Address::	San Clemente
State or Province of Mailing Address::	California
Country of Mailing Address::	United States of America
Postal or Zip Code of Mailing Address::	92672

Correspondence Information	
Correspondence Customer Number::	36441
Name::	Howson and Howson
Street of Mailing Address::	Spring House Corporate Center, Box 457
City of Mailing Address::	Spring House
State or Province of Mailing Address::	Pennsylvania
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	19477
Phone Number::	215-540-9200
Fax Number::	215-540-5818
E-Mail Address::	mebak@howsonandhowson.com

Representative Information		
Representative Customer No. 36441	Registration Number	Name

Domestic Priority Information			
Application	Continuity Type	Parent Application	Parent Filing Date
This Application	Is a Continuation-in-part	09/923,515	August 7, 2001
This Application	An application claiming the benefit under 35 USC 119 (e)	60/475,402	June 2, 2003

Assignee Information	
Assignee Name::	ISIS Pharmaceuticals, Inc.
Street of Mailing Address::	2292 Faraday Avenue
City of Mailing Address::	Carlsbad
State or Province of Mailing Address::	California
Country of Mailing Address::	United States of America
Postal or Zip Code of Mailing Address::	92008